

## Application Information

Title:: ROCKING DISPLAY DEVICE  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?: None  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets::  
Small Entity:: Yes  
Attorney Docket No:: 24637-5

## Applicant Information

### 1. First Inventor

Given Name:: Michael  
Family Name:: Merk  
City of Residence:: Bay Village  
State or Province  
of Residence:: Ohio  
Country of Residence:: United States of America  
Street of Mailing Address::  
City of Mailing Address::  
State or Province  
of Mailing Address::  
Country of Mailing Address::  
Zip Code of Mailing Address::

### 2. Second Inventor

Given Name:: John  
Family Name:: Nottingham  
City of Residence:: Hunting Valley  
State or Province  
of Residence:: Ohio  
Country of Residence:: United States of America  
Street of Mailing Address::  
City of Mailing Address::  
State or Province  
of Mailing Address::  
Country of Mailing Address::  
Zip Code of Mailing Address::

**3. Third Inventor**

**Given Name::** John  
**Family Name::** Spirk  
**City of Residence::** Gates Mills  
**State or Province of Residence::** Ohio  
**Country of Residence::** United States of America  
**Street of Mailing Address::**  
**City of Mailing Address::**  
**State or Province of Mailing Address::**  
**Country of Mailing Address::**  
**Zip Code of Mailing Address::**

**4. Fourth Inventor**

**Given Name::** Dennis  
**Family Name::** Futo  
**City of Residence::** Strongsville  
**State or Province of Residence::** Ohio  
**Country of Residence::** United States of America  
**Street of Mailing Address::**  
**City of Mailing Address::**  
**State or Province of Mailing Address::**  
**Country of Mailing Address::**  
**Zip Code of Mailing Address::**

**5. Fifth Inventor**

**Given Name::** Wing  
**Family Name::** Yen  
**City of Residence::**  
**State or Province of Residence::**  
**Country of Residence::**  
**Street of Mailing Address::**  
**City of Mailing Address::**  
**State or Province of Mailing Address::**  
**Country of Mailing Address::**  
**Zip Code of Mailing Address::**

**6. Sixth Inventor**

<b>Given Name::</b>	<b>Melvin</b>
<b>Family Name::</b>	<b>Lai</b>
<b>City of Residence::</b>	
<b>State or Province of Residence::</b>	
<b>Country of Residence::</b>	
<b>Street of Mailing Address::</b>	
<b>City of Mailing Address::</b>	
<b>State or Province of Mailing Address::</b>	
<b>Country of Mailing Address::</b>	
<b>Zip Code of Mailing Address::</b>	

## Correspondence Information

Correspondence Customer Number:: 21130

## Representative Information

Representative Customer Number:: 21130  
Representative Designation:: Primary  
Representative Name:: W. Scott Harders  
Registration Number:: 42,629

## Domestic Priority Information

None

## Foreign Priority Information

None

## Assignment Information

Assignee Name:: Thoughtworks Ltd.  
Street of Mailing Address:: 3635 Perkins Avenue, Suite 6B  
City of Mailing Address:: Cleveland  
State or Province  
of Mailing Address:: Ohio  
Country of Mailing Address:: United States of America  
Zip Code of Mailing Address:: 44114